



SWMP# _____

REGIONAL STORM WATER MANAGEMENT PARTICIPATION FORM

General Information

Plat / AP #/ Other: _____ Name of the Site: _____ ☐ COSA (ICL) ☐ ETJ

Address of the Site: _____ BCAD Parcel ID: _____

Engineer/Contact: _____ FIRM: _____ Phone: _____

Owner/Developer: _____ Phone: _____

Development Information

The information is mandatory and will be used to calculate the participation fee and to track changes in impervious cover.
FILO [Fee in Lieu of Detention] = Increased Impervious Cover (sq. ft.) multiplied by FILO Rate (\$/sq. ft.)

Type of Development (FILO Rate \$/sq. ft.):

<input type="checkbox"/> Public Facilities (\$ 0.20/sq. ft.)	<input type="checkbox"/> Single Family (\$ 0.15/sq. ft.)	<input type="checkbox"/> Multi Family (\$ 0.20/sq. ft.)
<input type="checkbox"/> Inc. of Imp. Cover < 100 sq. ft (No fee)	<input type="checkbox"/> Industrial (\$ 0.20/sq. ft.)	<input type="checkbox"/> Commercial (\$ 0.25/sq. ft.)
<input type="checkbox"/> Detention Provided (no fee)	<input type="checkbox"/> Other (describe work type): _____	
	<input type="checkbox"/> LID (potential reduction- contact TCI Storm Water staff)	

Is the property located in any of the development zones below?

☐ ICRIP: Lot > 20,000 sq. ft. (50% Fee) ☐ ICRIP: Lot ≤ 20,000 sq. ft. (No Fee) ☐ IDZ (No Fee)

ICRIP Waiver # (required for reduced fee) _____

FILO Previously Paid (\$ or N/A)*: _____ **Paid Date:** _____ **Paid with Plat/Permit #:** _____

<input type="checkbox"/> Plat Application	<input type="checkbox"/> Building Permit Application
Platted Area (acres):	Increase/Decrease in Impervious Cover (sq. ft.): [circle one]
Total FILO (\$): [Increased Imp. Cover X FILO Rate]	FILO Previously Paid (\$)*:
	Net FILO Due (\$): [Total - Previously Paid]

**Please include supporting documentation as an attachment or in the drainage report.*

Owners Acknowledgment

I am the owner(s) or an agent of the owner, authorized to execute this acknowledgement, of the above described property. It is acknowledged that the proposed development of the property will impact the above noted watershed and that said development falls under the provisions of ordinance No. 86711 passed and approved the 25th day of September, 1997 and subsequent amending ordinance 2013-01-31-0074 passed and approved the 31st day of January, 2013. Further, it is acknowledged that I have elected to pay a storm water development fee, in the applicable amount as set out in the current fee schedule, in lieu of constructing on-site detention facilities.

OWNER(S) NAME: _____ **OWNER:** _____

Print Signature Date

City Approval

It is acknowledged that the storm water development fee for development of property, as described above, is hereby accepted. It is further acknowledged that said fee shall be placed into the Regional Storm Water Management Program account and shall be used solely in the manner prescribed ordinance No. 86711 passed and approved the 25th day of September, 1997 and subsequent amending ordinance 2013-01-31-0074 passed and approved the 31st day of January, 2013.

CITY: _____

Director of TCI or Designee Date

County Approval (Applicable for ETJ only)

COUNTY REPRESENTATIVE: _____

Signature Date